

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of Tennessee

Case number (If known): \_\_\_\_\_

Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Thomas  
First name  
Jason  
Middle name  
Boatner  
Last name  
Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

First name  
Middle name  
Last name  
Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 0 1 4 3

OR

9 xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9 xx - xx - \_\_\_\_\_

	<b>About Debtor 1:</b>	<b>About Debtor 2 (Spouse Only in a Joint Case):</b>																																
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b>	<p><input checked="" type="checkbox"/> I have not used any business names or EINs.</p> <p>Business name _____</p> <p>Business name _____</p> <p>EIN _____</p> <p>_____</p> <p>EIN _____</p>	<p><input type="checkbox"/> I have not used any business names or EINs.</p> <p>Business name _____</p> <p>Business name _____</p> <p>EIN _____</p> <p>_____</p> <p>EIN _____</p>																																
<b>5. Where you live</b>	<p>785 Kennesaw Lane</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">_____</td> </tr> </table> <p>Lenoir City                                    TN                            37771</p> <table border="0"> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> <tr> <td>Loudon County</td> <td></td> <td></td> </tr> <tr> <td>County</td> <td></td> <td></td> </tr> </table> <p>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</p> <table border="0"> <tr> <td>Number</td> <td>Street</td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td>P.O. Box</td> <td>_____</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> <tr> <td colspan="2">_____</td> <td>_____</td> </tr> <tr> <td colspan="2">_____</td> <td>_____</td> </tr> </table>		Number	Street	_____		_____		City	State	ZIP Code	Loudon County			County			Number	Street	_____		_____		P.O. Box	_____	City	State	ZIP Code	_____		_____	_____		_____
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P.O. Box	_____																																	
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<b>6. Why you are choosing this district to file for bankruptcy</b>	<p><i>Check one:</i></p> <p><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p>																																	
	<p><i>Check one:</i></p> <p><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p>																																	

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

**8. How you will pay the fee**

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

**I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

**I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

No  
 Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No  
 Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

**11. Do you rent your residence?**

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No

Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

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**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

**16. What kind of debts do you have?**

16a. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

16b. **Are your debts primarily business debts?** Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

**17. Are you filing under Chapter 7?**

No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No  
 Yes

**18. How many creditors do you estimate that you owe?**

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**19. How much do you estimate your assets to be worth?**

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**20. How much do you estimate your liabilities to be?**

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input checked="" type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Thomas Jason Boatner

Signature of Debtor 1

Executed on 04/29/2019

MM / DD / YYYY



Signature of Debtor 2

Executed on

MM / DD / YYYY

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick Woodside

Signature of Attorney for Debtor

Date

04/29/2019

MM / DD / YYYY

Patrick Woodside

Printed name

Woodside Law

Firm name

9724 Kingston Pike

Number Street

Suite 504

Knoxville

TN

37922

City

State

ZIP Code

Contact phone 8657480520

Email address patrickcwoodside@gmail.com

025772

TN

Bar number

State

Certificate Number: 12459-TNE-CC-032742714



12459-TNE-CC-032742714

## CERTIFICATE OF COUNSELING

I CERTIFY that on April 29, 2019, at 5:18 o'clock PM PDT, Thomas Boatner received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of Tennessee, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 29, 2019 By: /s/Abigail Hernandez

Name: Abigail Hernandez

Title: Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Fill in this information to identify your case:

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street	From _____ To _____	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
City State ZIP Code	City State ZIP Code	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Number Street	From _____ To _____	Number Street	From _____ To _____
City State ZIP Code	City State ZIP Code	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 135,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
<b>For last calendar year:</b> (January 1 to December 31, <u>2018</u> <u>YYYY</u> )	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 584,595.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> <u>YYYY</u> )	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 678,039.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>		
<b>For last calendar year:</b> (January 1 to December 31, <u>                    </u> )	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>		
<b>For the calendar year before that:</b> (January 1 to December 31, <u>                    </u> )	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>	<u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u> <u>                        </u> \$ <u>                        </u>		

Debtor 1 Thomas Jason Boatner  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	

Debtor 1 Thomas Jason Boatner  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				
Insider's Name		\$ _____	\$ _____	
Number Street				
City State ZIP Code				

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title:		Court Name  Number Street  City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____			
Case title:		Court Name  Number Street  City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____			

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name  Number Street  City State ZIP Code			\$ _____
	Explain what happened		
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name  Number Street  City State ZIP Code		Date	Value of the property
	Explain what happened		
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	\$ _____	

Debtor 1 Thomas Jason Boatner  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No

Yes. Fill in the details.

Creditor's Name \_\_\_\_\_  
 Number Street \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Describe the action the creditor took	Date action was taken	Amount
_____	_____	\$ _____

Last 4 digits of account number: XXXX–

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No

Yes

**Part 5: List Certain Gifts and Contributions**

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person \_\_\_\_\_  
 Person to Whom You Gave the Gift \_\_\_\_\_  
 \_\_\_\_\_  
 Number Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Person's relationship to you \_\_\_\_\_

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Gifts with a total value of more than \$600 per person \_\_\_\_\_  
 Person to Whom You Gave the Gift \_\_\_\_\_  
 \_\_\_\_\_  
 Number Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Person's relationship to you \_\_\_\_\_

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Debtor 1 Thomas Jason Boatner  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name <hr/> <hr/>		_____	\$ _____
Number Street <hr/>		_____	\$ _____
City State ZIP Code <hr/>			

**Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss <small>Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.</small>	Date of your loss	Value of property lost
		_____	\$ _____

**Part 7: List Certain Payments or Transfers**

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Patrick C. Woodside, Jr. <hr/> Person Who Was Paid  9724 Kingston Pike <hr/> Number Street  Suite 504 <hr/> Knoxville TN 37922 <hr/> City State ZIP Code  patrickcwoodside@gmail.com <hr/> Email or website address  Person Who Made the Payment, if Not You	Attorney Fees <hr/> 04/2019 <hr/>	\$ 1,500.00 <hr/> \$ _____

Debtor 1

Thomas Jason Boatner

First Name Middle Name Last Name

Case number (if known)

Abacus

Person Who Was Paid

15760 Ventura Blvd

Number Street

Encino CA 91436  
City State ZIP Code

abacuscc.org

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Credit Counseling	<u>04/2019</u>	\$ <u>25.00</u>
		\$ _____

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid

Number Street

City State ZIP Code

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		\$ _____
		\$ _____

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you \_\_\_\_\_

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
		_____

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you \_\_\_\_\_

		_____
--	--	-------

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust	_____

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		
City State ZIP Code		

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No

Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name		\$ _____
Number Street	Number Street	
City State ZIP Code		
City State ZIP Code		

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_____
Number Street	Number Street	
City State ZIP Code		
City State ZIP Code		

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_____
Number Street	Number Street	
City	State ZIP Code	
City	State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title	Court Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number Street	
Case number	City State ZIP Code	

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

The Boatner Group, LLC Business Name 15203 Rankin Avenue Number Street	Describe the nature of the business Pizza sales	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Dunlap TN 37327 City State ZIP Code	Name of accountant or bookkeeper	Dates business existed  From 05/18/2012 To 03/31/2019
Business Name Number Street	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed  From _____ To _____

Debtor 1 First Name _____ Middle Name _____ Last Name _____	Case number (if known) _____	
Business Name _____	Describe the nature of the business _____	Employer Identification number Do not include Social Security number or ITIN.
Number Street _____	EIN: _____	Dates business existed
City _____ State _____ ZIP Code _____	Name of accountant or bookkeeper _____	From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued \_\_\_\_\_

Name \_\_\_\_\_

MM / DD / YYYY \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Thomas Jason Boatner

Signature of Debtor 1



Signature of Debtor 2

Date 04/29/2019

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number			

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 785 Kennesaw Lane

Street address, if available, or other description

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ 275,700.00      \$ 275,700.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Tenancy by the Entireties

Check if this is community property

Lenoir City      TN      37771

City      State      ZIP Code

**Who has an interest in the property?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

If you own or have more than one, list here:

1.2. Street address, if available, or other description

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_      \$ \_\_\_\_\_

City      State      ZIP Code

**Who has an interest in the property?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Check if this is community property  
(see instructions)

County

**Other information you wish to add about this item, such as local property identification number:**

1. _____	<b>What is the property?</b> Check all that apply.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Street address, if available, or other description _____	<input type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building <input type="checkbox"/> Condominium or cooperative <input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____	Current value of the entire property?	Current value of the portion you own?
City _____ State _____ ZIP Code _____	\$ _____ \$ _____		
County _____	<b>Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.</b> _____		
	<b>Who has an interest in the property?</b> Check one.		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	
	<b>Other information you wish to add about this item, such as local property identification number:</b> _____		
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ..... → <span style="border: 1px solid black; padding: 2px;">\$ 275,700.00</span>			

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.**

### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

3.1. Make: Buick

Model: Enclave

Year: 2010

Approximate mileage: \_\_\_\_\_

Other information:  
 Condition: Good

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 10,100.00 \$ 10,100.00

If you own or have more than one, describe here:

3.2. Make: Kia

Model: Optima

Year: 2014

Approximate mileage: 195,945

Other information:  
 Condition: Good

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 5,000.00 \$ 5,000.00

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information:

**Who has an interest in the property?** Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Who has an interest in the property?** Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No

Yes

4.1. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information:

**Who has an interest in the property?** Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information:

**Who has an interest in the property?** Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ..... ➔

\$ 15,100.00

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

No

Living room furniture, bedroom furniture, kitchen table/chairs, dining room furniture, washer/dryer, refrigerator (1/2 interest)

Yes. Describe.....

\$ 850.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

2 laptops, 3 Ipads, 3 tvs (1/2 interest)

Yes. Describe.....

\$ 300.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

\$ 0.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

\$ 0.00

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

\$ 0.00

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Clothing

Yes. Describe.....

\$ 500.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Jewelry

\$ 400.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

\$ 0.00

**14. Any other personal and household items you did not already list, including any health aids you did not list**

Tools, lawnmower (1/2 interest)

No

Yes. Give specific information.....

\$ 300.00

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$ 2,350.00

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Cash: .....

\$ \_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

17.1. Checking account:	Knoxville TVA FCU (1/2 interest)	\$ 3,750.00
17.2. Checking account:		\$ _____
17.3. Savings account:	ORNL FCU	\$ 1.00
17.4. Savings account:	Knoxville TVA FCU (1/2 interest)	\$ 1,200.00
17.5. Certificates of deposit:		\$ _____
17.6. Other financial account:	First US Bank (1/2 interest)	\$ 150.00
17.7. Other financial account:		\$ _____
17.8. Other financial account:		\$ _____
17.9. Other financial account:		\$ _____

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them. ....

Name of entity:

% of ownership:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them. ....

Issuer name:

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Institution name:

Type of account:

401(k) or similar plan: \_\_\_\_\_ \$ \_\_\_\_\_

Pension plan: \_\_\_\_\_ \$ \_\_\_\_\_

IRA: \_\_\_\_\_ \$ \_\_\_\_\_

Retirement account: \_\_\_\_\_ \$ \_\_\_\_\_

Keogh: \_\_\_\_\_ \$ \_\_\_\_\_

Additional account: \_\_\_\_\_ \$ \_\_\_\_\_

Additional account: \_\_\_\_\_ \$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes..... Institution name or individual:

Electric: \_\_\_\_\_ \$ \_\_\_\_\_

Gas: \_\_\_\_\_ \$ \_\_\_\_\_

Heating oil: \_\_\_\_\_ \$ \_\_\_\_\_

Rental unit: \_\_\_\_\_ \$ \_\_\_\_\_

Prepaid rent: \_\_\_\_\_ \$ \_\_\_\_\_

Telephone: \_\_\_\_\_ \$ \_\_\_\_\_

Water: \_\_\_\_\_ \$ \_\_\_\_\_

Rented furniture: \_\_\_\_\_ \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

No

Yes..... Issuer name and description:

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

\$ _____
\$ _____
\$ _____

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them. ..

\$ 0.00
---------

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them. ..

\$ 0.00
---------

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them. ..

\$ 0.00
---------

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

--

Federal: \$ 0.00  
State: \$ 0.00  
Local: \$ 0.00

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information. ....

--

Alimony: \$ 0.00  
Maintenance: \$ 0.00  
Support: \$ 0.00  
Divorce settlement: \$ 0.00  
Property settlement: \$ 0.00

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information. ....

\$ 0.00
---------

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company      Company name:  
of each policy and list its value. ....

Beneficiary:

Surrender or refund value:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information. ....

\$ 0.00

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim. ....

\$ 0.00

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim. ....

\$ 0.00

**35. Any financial assets you did not already list**

No

Yes. Give specific information. ....

\$ 0.00

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →

\$ 5,101.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

No

Yes. Describe. ....

\$ 0.00

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe. ....

\$ 0.00

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No

Yes. Describe.....

\$ 0.00

41. Inventory

No

Yes. Describe.....

\$ 0.00

42. Interests in partnerships or joint ventures

No

Yes. Describe..... Name of entity:

% of ownership:

\_\_\_\_\_ % \$ \_\_\_\_\_  
\_\_\_\_\_ % \$ \_\_\_\_\_  
\_\_\_\_\_ % \$ \_\_\_\_\_

43. Customer lists, mailing lists, or other compilations

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.....

\$ 0.00

44. Any business-related property you did not already list

No

Yes. Give specific information .....

Business equipment used in Little Caesar's franchise \$ 10,000.00  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached  
for Part 5. Write that number here →

\$ 10,000.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No

Yes.....

\$ \_\_\_\_\_



## Fill in this information to identify your case:

Debtor 1	Thomas Jason Boatner	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Last Name	
United States Bankruptcy Court for the: Eastern District of Tennessee		
Case number (if known)		

Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Household goods - Living room furniture, bedroom furniture, kitchen table/chairs, dining room furniture, washer/dryer, refrigerator (1/2 interest)	\$ 850.00	<input checked="" type="checkbox"/> \$ 850.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	26-2-103
Line from <i>Schedule A/B</i> : 6			
Brief description: Electronics - 2 laptops, 3 ipads, 3 tvs (1/2 interest)	\$ 300.00	<input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	26-2-103
Line from <i>Schedule A/B</i> : 7			
Brief description: Clothing - Clothing	\$ 500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	26-2-104
Line from <i>Schedule A/B</i> : 11			

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

First Name Middle Name Last Name

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Jewelry - Jewelry Brief description: Line from Schedule A/B: 12 Brief description: Line from Schedule A/B: 14 Brief description: Line from Schedule A/B: 17.1 Brief description: Line from Schedule A/B: 17.3 Brief description: Line from Schedule A/B: 17.4 Brief description: Line from Schedule A/B: 17.6 Brief description: Line from Schedule A/B: Brief description:	\$ 400.00  \$ 300.00  \$ 3,750.00  \$ 1.00  \$ 1,200.00  \$ 150.00  \$ _____  \$ _____  \$ _____  \$ _____  \$ _____  \$ _____  \$ _____  \$ _____	<input checked="" type="checkbox"/> \$ 400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input checked="" type="checkbox"/> \$ 3,750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input checked="" type="checkbox"/> \$ 1,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input checked="" type="checkbox"/> \$ 150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit  <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	26-2-104  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103  26-2-103

**Fill in this information to identify your case:**

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A <b>Amount of claim</b> Do not deduct the value of collateral.	Column B <b>Value of collateral that supports this claim</b>	Column C <b>Unsecured portion if any</b>
2.1 Bank of America	\$11,137.00	\$ 10,100.00	\$ 1,037.00
Creditor's Name PO Box 45224	Describe the property that secures the claim: 2010 Buick Enclave - \$10,100.00		
Number Street			
Jacksonville FL 32232	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who owes the debt?</b> Check one.	<b>Nature of lien.</b> Check all that apply.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 2019	<b>Last 4 digits of account number</b>		
2.2 Civis Bank	\$153,180.00	\$ 10,000.00	\$ 143,180.00
Creditor's Name PO Box 550	Describe the property that secures the claim: Business equipment used in Little Caesar's franchise - \$10,000.00		
Number Street			
Rogersville TN 37857	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who owes the debt?</b> Check one.	<b>Nature of lien.</b> Check all that apply.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 11/2013	<b>Last 4 digits of account number</b>		
<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b> \$ 164,317.00			

Debtor 1

Thomas Jason Boatner

First Name Middle Name

Last Name

**Additional Page**

**Part 1:** After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

**Column C**  
**Unsecured portion If any**

**2.3 ORNL Federal Credit Union**

Describe the property that secures the claim: \$ 5,239.00 \$ 5,000.00 \$ 239.00

Creditor's Name  
PO Box 365  
Number Street

2014 Kia Optima - \$5,000.00

Oak Ridge TN 37831  
City State ZIP Code

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

**Who owes the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**Date debt was incurred** \_\_\_\_\_**Last 4 digits of account number****2.4 ORNL Federal Credit Union**

Describe the property that secures the claim: \$ 39,698.00 \$ 275,700.00 \$ 0.00

Creditor's Name  
PO Box 365  
Number Street

785 Kennesaw Lane, Lenoir City, TN 37771 - \$275,700.00

Oak Ridge TN 37831  
City State ZIP Code

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

**Who owes the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**Date debt was incurred** \_\_\_\_\_**Last 4 digits of account number****2.5 PennyMac**

Describe the property that secures the claim: \$ 188,718.00 \$ 275,700.00 \$ 0.00

Creditor's Name  
P.O. Box 514387  
Number Street

785 Kennesaw Lane, Lenoir City, TN 37771 - \$275,700.00

Los Angeles CA 90051-4387  
City State ZIP Code

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

**Who owes the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**Date debt was incurred** \_\_\_\_\_**Last 4 digits of account number**

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 233,655.00

If this is the last page of your form, add the dollar value totals from all pages.  
 Write that number here: \$ 397,972.00

Fill in this information to identify your case:

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number (if known) _____			

Check if this is an amended filing

**Official Form 106E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**

No. Go to Part 2.  
 Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	<p>Priority Creditor's Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
	Last 4 digits of account number	\$ _____	\$ _____ \$ _____
	When was the debt incurred?	_____	
	<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations  <input type="checkbox"/> Taxes and certain other debts you owe the government  <input type="checkbox"/> Claims for death or personal injury while you were intoxicated  <input type="checkbox"/> Other. Specify _____</p>		
2.2	<p>Priority Creditor's Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
	Last 4 digits of account number	\$ _____	\$ _____ \$ _____
	When was the debt incurred?	_____	
	<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations  <input type="checkbox"/> Taxes and certain other debts you owe the government  <input type="checkbox"/> Claims for death or personal injury while you were intoxicated  <input type="checkbox"/> Other. Specify _____</p>		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

ADT Security Services

		<b>Total claim</b>
4.1	<p>Nonpriority Creditor's Name 3190 S Vaughn Way Number Street</p> <p>Aurora CO 80014 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b>  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 2019</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Utility Services</p>
4.2	<p>Nonpriority Creditor's Name 1851 N Resler Dr Number Street</p> <p>El Paso TX 79912 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b>  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 2018</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Suppliers and Vendors</p>
4.3	<p>Nonpriority Creditor's Name 338 Cumberland Avenue Number Street</p> <p>Pikeville TN 37367 City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b>  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 2019</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify Utility Services</p>

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.4	Debra Johnston	<input type="text"/>
Nonpriority Creditor's Name 12502 Yarnell Road Number Street		<b>Last 4 digits of account number</b> <input type="text"/> \$ <u>90,000.00</u>
		<b>When was the debt incurred?</b> <input type="text"/>
<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Monies Loaned / Advanced</u>		
<b>Who incurred the debt? Check one.</b> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.5	Discover	<input type="text"/> \$ <u>6,636.00</u>
Nonpriority Creditor's Name PO Box 790213 Number Street		<b>Last 4 digits of account number</b> <input type="text"/> When was the debt incurred? <u>2014-19</u>
<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card Debt</u>		
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.6	Dunlap Natural Gas System	<input type="text"/> \$ <u>1,392.00</u>
Nonpriority Creditor's Name PO Box 145 Number Street		<b>Last 4 digits of account number</b> <input type="text"/> When was the debt incurred? <u>2019</u>
<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utility Services</u>		
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		<b>Total claim</b>
4.7	Dunlap Water System	
Nonpriority Creditor's Name		Last 4 digits of account number
PO Box 639		\$ 2,203.00
Number Street		When was the debt incurred? <u>2019</u>
Dunlap TN 37327		As of the date you file, the claim is: Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.8	NuArx	
Nonpriority Creditor's Name		Last 4 digits of account number
Dept CH 17101		\$ 459.00
Number Street		When was the debt incurred? <u>2018</u>
Palatine IL 60055		As of the date you file, the claim is: Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.9	PepsiCo	
Nonpriority Creditor's Name		Last 4 digits of account number
75 Remittance Drive		\$ 2,469.00
Number Street		When was the debt incurred? <u>2018-19</u>
Chicago IL 60675		As of the date you file, the claim is: Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		<b>Total claim</b>
4.10	Republic Services	\$ 644.00
Nonpriority Creditor's Name 1018 E 38th Street		Last 4 digits of account number
Number Street		When was the debt incurred? <u>2019</u>
Chattanooga TN 37407		<b>As of the date you file, the claim is:</b> Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Utility Services		
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.11	Sequatchie Valley Electric Coop	\$ 947.00
Nonpriority Creditor's Name PO Box 31		Last 4 digits of account number
Number Street		When was the debt incurred? <u>2019</u>
South Pittsburg TN 37380		<b>As of the date you file, the claim is:</b> Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Utility Services		
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.12	Synchrony Bank/Carecredit	\$ 1,000.00
Nonpriority Creditor's Name PO Box 960061		Last 4 digits of account number
Number Street		When was the debt incurred? <u>2018</u>
Orlando FL 32896-0061		<b>As of the date you file, the claim is:</b> Check all that apply.
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt		
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Total claim
<b>4.13 United Community Bank</b>	<b>Total claim</b>
Nonpriority Creditor's Name PO Box 790408	Last 4 digits of account number <u>4,137.00</u>
Number Street	When was the debt incurred? <u>2018</u>
<b>As of the date you file, the claim is:</b> Check all that apply.	
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b>	
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	
<b>Who incurred the debt?</b> Check one.	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	
<b>Check if this claim is for a community debt</b>	
<b>Is the claim subject to offset?</b>	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Nonpriority Creditor's Name</b>	Last 4 digits of account number <u>\$</u>
Number Street	When was the debt incurred?
<b>As of the date you file, the claim is:</b> Check all that apply.	
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b>	
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	
<b>Who incurred the debt?</b> Check one.	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
<b>Check if this claim is for a community debt</b>	
<b>Is the claim subject to offset?</b>	
<input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Nonpriority Creditor's Name</b>	Last 4 digits of account number <u>\$</u>
Number Street	When was the debt incurred?
<b>As of the date you file, the claim is:</b> Check all that apply.	
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b>	
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify	
<b>Who incurred the debt?</b> Check one.	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
<b>Check if this claim is for a community debt</b>	
<b>Is the claim subject to offset?</b>	
<input type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Glassman Law Firm, PLLC

Name

1415 South Voss

Number Street  
Suite 110-145Houston TX 77057  
City State ZIP Code

Lyon Collection Services Inc.

Name

7924 West Sahara Avenue

Number Street

Las Vegas NV 89117  
City State ZIP Code

Name

Number Street

City State ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**Line 4.8 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims**Last 4 digits of account number**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

**6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.**  
**Add the amounts for each type of unsecured claim.**

		<b>Total claim</b>
<b>Total claims from Part 1</b>	<b>6a. Domestic support obligations</b>	6a. \$ _____ 0.00
	<b>6b. Taxes and certain other debts you owe the government</b>	6b. \$ _____ 0.00
	<b>6c. Claims for death or personal injury while you were intoxicated</b>	6c. \$ _____ 0.00
	<b>6d. Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. + \$ _____ 0.00
	<b>6e. Total.</b> Add lines 6a through 6d.	6e. \$ _____ 0.00
		<b>Total claim</b>
<b>Total claims from Part 2</b>	<b>6f. Student loans</b>	6f. \$ _____ 0.00
	<b>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g. \$ _____ 0.00
	<b>6h. Debts to pension or profit-sharing plans, and other similar debts</b>	6h. \$ _____ 0.00
	<b>6i. Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ _____ 111,013.00
	<b>6j. Total.</b> Add lines 6f through 6i.	6j. \$ _____ 111,013.00

Fill in this information to identify your case:

Debtor	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the Eastern District of Tennessee			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	ABBA's Properties Alpha, LLC Name PO Box 9 Street State GA ZIP Code 30177 City			Commercial Leasehold (Expired) 15203 Rankin Avenue Dunlap, TN 37327 Lessee
2.2	Name Street City State ZIP Code			
2.3	Name Street City State ZIP Code			
2.4	Name Street City State ZIP Code			
2.5	Name Street City State ZIP Code			

**Fill in this information to identify your case:**

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number (if known) _____			

Check if this is an amended filing

**Official Form 106H****Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

**1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)**

No  
 Yes

**2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include**

Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Tabatha Boatner

Name  
785 Kennesaw Lane  
Street  
Lenoir City TN 37771  
City State ZIP Code

Schedule D, line 2.4

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

3.2

Tabatha Boatner

Name  
785 Kennesaw Lane  
Street  
Lenoir City TN 37771  
City State ZIP Code

Schedule D, line 2.5

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

3.3

Tabatha Boatner

Name  
785 Kennesaw Lane  
Street  
Lenoir City TN 37771  
City State ZIP Code

Schedule D, line 2.3

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

Debtor 1

Thomas Jason Boatner

First Name Middle Name

Last Name

**Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

3.4

Tabatha Boatner

Name

785 Kennesaw Lane

Street

Lenoir City

TN

37771

City

State

ZIP Code

 Schedule D, line 2.1 Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

3.5

Tabatha Boatner

Name

785 Kennesaw Lane

Street

Lenoir City

TN

37771

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.4 Schedule G, line \_\_\_\_\_

3.6

Tabatha Boatner

Name

785 Kennesaw Lane

Street

Lenoir City

TN

37771

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.13 Schedule G, line \_\_\_\_\_

3.\_

Name

Street

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

3.\_

Name

Street

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

3.\_

Name

Street

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

3.\_

Name

Street

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

3.\_

Name

Street

City

State

ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	Thomas Jason Boatner		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Tennessee			
Case number (if known) _____			

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

12/15

## Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

**Debtor 1**

Employed  
 Not employed

**Debtor 2 or non-filing spouse**

Employed  
 Not employed

**Occupation**

Package Handler

Manager

FedEx Ground

First US Bank

**Employer's name**

2560 Bertelkamp Dr

131 West Front Street

Number Street

Number Street

**Employer's address**

Knoxville, TN 37931

Thomasville, AL 36784

City State ZIP Code

City State ZIP Code

**How long employed there?** 7 Months

6 Years

### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions (before all payroll deductions).** If not paid monthly, calculate what the monthly wage would be.

**For Debtor 1**

2. \$ 1,696.50

**For Debtor 2 or non-filing spouse**

\$ 5,132.68

**3. Estimate and list monthly overtime pay.**

3. + \$ 0.00

+ \$ 0.00

**4. Calculate gross income.** Add line 2 + line 3.

4. \$ 1,696.50

\$ 5,132.68

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here.....</b>	<b>→ 4.</b>	<b>\$ 1,696.50</b>
<b>5. List all payroll deductions:</b>		<b>\$ 5,132.68</b>
5a. Tax, Medicare, and Social Security deductions	5a. \$ 131.08	\$ 682.33
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 205.12
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 707.89
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____ _____ _____ _____	5h. + \$ _____ \$ _____ \$ _____ \$ _____	+ \$ _____ \$ _____ \$ _____ \$ _____
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	<b>6. \$ 131.08</b>	<b>\$ 1,595.34</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>7. \$ 1,565.42</b>	<b>\$ 3,537.34</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$ 0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<b>9. \$ 0.00</b>	<b>\$ 0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,565.42	+ \$ 3,537.34 = \$ 5,102.76
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: _____	11. + \$ 0.00	\$ 5,102.76
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 5,102.76	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	
<b>Combined monthly income</b>		

**Fill in this information to identify your case:**

Debtor 1	Thomas Jason Boatner	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	Eastern District of Tennessee	
	(State)	
Case number (If known)		

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?

No  
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

9

No

Son

6

Yes

\_\_\_\_\_

\_\_\_\_\_

No

\_\_\_\_\_

\_\_\_\_\_

Yes

\_\_\_\_\_

\_\_\_\_\_

No

\_\_\_\_\_

\_\_\_\_\_

Yes

\_\_\_\_\_

\_\_\_\_\_

No

\_\_\_\_\_

\_\_\_\_\_

Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

**Your expenses**

4. \$ 1,398.97

4a. \$ 0.00

4b. \$ 0.00

4c. \$ 50.00

4d. \$ 0.00

Debtor 1 Thomas Jason Boatner  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

		<b>Your expenses</b>
<b>5.</b>	<b>Additional mortgage payments for your residence, such as home equity loans</b>	5. \$ <u>0.00</u>
<b>6. Utilities:</b>		
6a.	Electricity, heat, natural gas	6a. \$ <u>320.00</u>
6b.	Water, sewer, garbage collection	6b. \$ <u>10.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>234.61</u>
6d.	Other. Specify: _____	6d. \$ <u>0.00</u>
<b>7.</b>	<b>Food and housekeeping supplies</b>	7. \$ <u>900.00</u>
<b>8.</b>	<b>Childcare and children's education costs</b>	8. \$ <u>0.00</u>
<b>9.</b>	<b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>42.00</u>
<b>10.</b>	<b>Personal care products and services</b>	10. \$ <u>45.00</u>
<b>11.</b>	<b>Medical and dental expenses</b>	11. \$ <u>111.00</u>
<b>12.</b>	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>871.00</u>
<b>13.</b>	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>50.00</u>
<b>14.</b>	<b>Charitable contributions and religious donations</b>	14. \$ <u>0.00</u>
<b>15.</b>	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. \$ <u>0.00</u>
15b.	Health insurance	15b. \$ <u>0.00</u>
15c.	Vehicle insurance	15c. \$ <u>120.05</u>
15d.	Other insurance. Specify: _____	15d. \$ <u>0.00</u>
<b>16.</b>	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
<b>17.</b>	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. \$ <u>221.00</u>
17b.	Car payments for Vehicle 2	17b. \$ <u>333.07</u>
17c.	Other. Specify: _____	17c. \$ <u>0.00</u>
17d.	Other. Specify: _____	17d. \$ <u>0.00</u>
<b>18.</b>	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>
<b>19.</b>	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ <u>0.00</u>
<b>20.</b>	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. \$ <u>0.00</u>
20b.	Real estate taxes	20b. \$ <u>0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e.	Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

21. Other. Specify: Spouse's payments	21. +\$ 330.00
	+\$ _____
	+\$ _____
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. \$ 5,036.70
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b. \$ _____
and 22b. The result is your monthly expenses.	22c. \$ 5,036.70
23. Calculate your monthly net income.	
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$ 5,102.76
23b. Copy your monthly expenses from line 22c above.	23b. -\$ 5,036.70
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ 66.06
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes.	Explain here:

Fill in this information to identify your case:

Debtor 1 Thomas Jason Boatner  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of Tennessee

Case number (If known)

Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 /s/ Thomas Jason Boatner

Signature of Debtor 1

Date 04/29/2019  
MM / DD / YYYY



Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

United States Bankruptcy Court  
Eastern District of Tennessee

In re: Thomas Jason Boatner

Case No.

Debtor(s)

Chapter 7

**Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 04/29/2019

/s/ Thomas Jason Boatner

\_\_\_\_\_  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

ABBA's Properties Alpha, LLC  
PO Box 9  
Tate, GA 30177

NuArx  
Dept CH 17101  
Palatine, IL 60055

ADT Security Services  
3190 S Vaughn Way  
Aurora, CO 80014

ORNL Federal Credit Union  
PO Box 365  
Oak Ridge, TN 37831

AOP LLC  
1851 N Resler Dr  
El Paso, TX 79912

PennyMac  
P.O. Box 514387  
Los Angeles, CA 90051-4387

Bank of America  
PO Box 45224  
Jacksonville, FL 32232

PepsiCo  
75 Remittance Drive  
Chicago, IL 60675

Bledsoe Telephone Coop., Inc  
338 Cumberland Avenue  
Pikeville, TN 37367

Republic Services  
1018 E 38th Street  
Chattanooga, TN 37407

Civis Bank  
PO Box 550  
Rogersville, TN 37857

Squatchie Valley Electric Coop  
PO Box 31  
South Pittsburg, TN 37380

Debra Johnston  
12502 Yarnell Road  
Knoxville, TN 37932

Synchrony Bank/Carecredit  
PO Box 960061  
Orlando, FL 32896-0061

Discover  
PO Box 790213  
St Louis, MO 63179

Tabatha Boatner  
785 Kennesaw Lane  
Lenoir City, TN 37771

Dunlap Natural Gas System  
PO Box 145  
Dunlap, TN 37327

United Community Bank  
PO Box 790408  
Saint Louis, MO 63179

Dunlap Water System  
PO Box 639  
Dunlap, TN 37327

Glassman Law Firm, PLLC  
1415 South Voss  
Suite 110-145  
Houston, TX 77057

Lyon Collection Services Inc.  
7924 West Sahara Avenue  
Las Vegas, NV 89117